

BOARD OF MEDICAL LICENSURE AND DISCIPLINE
FULL BOARD
MINUTES OF MEETING
11 FEBRUARY 2009
Open Session
Minutes

Board Members in Attendance:

Joan Crawley

Charles Cronin, DO

Robert Dinwoodie, DO

Richard P. Iacobucci, MD

Noubar Kessimian MD

Shelagh McGowan

Board Members Absent:

David R. Gifford, MD, MPH, Chair

Patrick Barry, Esq.

Thomas Breslin, MD

Norm Chapman

Margaret Coughlin

Joseph DiPietro, Esq.

Staff Members in Attendance:

Robert S. Crausman, MD, Chief Administrative Officer

Bruce W. McIntyre, Board General Counsel

Mary Salerno, Administrative Officer

Guests:

James Carney, PA-C, RI Board of Physician Assistants

Robert O'Donnell, Medicolegal Administrator

1. A quorum was established at 9:20 AM. Dr. Crausman participated in his capacity as Director Designee for the Director of Health who is also Chair of the Board.

2. On a motion by Dr. Iacobucci seconded by Dr. Dinwoodie it was voted to approve the minutes of the 5 February 2009 Licensing Committee meeting.

3. On a motion by Dr. Cronin seconded by Dr. Dinwoodie it was voted to approve the minutes of the Open Session of the 14 January 2009 meeting.

4. Chief Administrative Officer's Report:

A. Mr. Carney described to the Board the recent and future efforts of the Physician Assistant's Board to establish a Physician Assistant training program within the State of Rhode Island. Board members volunteered ideas of associations and committees to contact for support and all members present endorsed the idea. Mr. Carney will

arrange a meeting with the Director to discuss a letter of support.

B. Mr. McIntyre presented the Board with an update on the progress of instituting the portable physician license application. The process has 2 parts: 1) the electronic universal initial license application, and 2) the acceptance of credentials verification from a previously certified source. By removing the redundancy the licensing process will be shortened by approximately 60 days. The Rhode Island Board has already begun using the universal initial license application and has accepted the Federal Credentials Verification Service (FCVS) for quite some time. Rhode Island is also the spearhead for the New England States. The technology and tools are available and States are starting to come on Board. What began as a 13 State effort has grown to 27 States, all of who were represented at the recent HRSA sponsored Summit. Remaining hurdles include training of staff and assuring security of the process. However the cost and timesavings insure that the process will, and is, expanding rapidly. In the first year of the program Iowa realized a \$125,000 savings, which was returned to their Department of Health. The overall goal is to establish a National E-folio that contains all of the physicians' information, which may be accessed by the NBME, hospitals, and other appropriate entities.

C. Mr. McIntyre presented the Board with a synopsis of the law relating to the filing of a complaint with the Medical Board using the example of a recent complaint filed with the DOH Complaint Unit by a

3rd party entity. All complaints are taken in by the Complaint Unit and then triaged to the appropriate Board. Each Board has the discretion to either open or not open an investigation into the complaint. If the Medical Board opens an investigation it does so under the charging authority of the Medical Board and not the complainant. Anyone can file a complaint with the RI Department of Health; the Board is the actual complainant.

D. The New York Times Article regarding surgical pause checklists was discussed. Rhode Island area hospitals are moving towards a universal surgical pause checklist.

5. Old Business:

None presented.

6. New Business:

None presented.

7. At 9:20 AM the Board adjourned to Executive Session pursuant to Sections 46-42-4 and 42-46-5 of the Rhode Island General Laws.